

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS3847AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/25/2009
NAME OF PROVIDER OR SUPPLIER BETTER DAYS GROUP HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 261 E ELDORADO LANE LAS VEGAS, NV 89114		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result an annual State Licensure survey conducted in your facility on March 25, 2009. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility is licensed for 8 Residential Facility for Group beds for elderly and disabled persons, Category I: 3 residents and Category II: 5 residents. The census at the time of the survey was 7. Seven resident files were reviewed and 5 employee files were reviewed.</p> <p>Complaint #21421 was unsubstantiated.</p>	Y 000		
Y 070 SS=F	<p>449.196(1)(f) Qualifications of Caregiver-8 hours training</p> <p>NAC 449.196 1. A caregiver of a residential facility must: (f) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility.</p> <p>This Regulation is not met as evidenced by: Based on record review on 3/25/09, the facility failed to ensure 5 of 5 caregivers received eight hours of annual training (Employee #1, #2, #3, #4 and #5).</p>	Y 070		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 070	Continued From page 1 This was a repeat of the 6/20/08 State Licensure survey. Severity: 2 Scope: 3	Y 070		
Y 072 SS=D	449.196(3) Qualications of Caregiver-Med re-training NAC 449.196 3. If a caregiver assists a resident of a residential facility in the administration of any medication, including, without limitation, an over-the-counter medication or dietary supplement, the caregiver must: (a) Receive, in addition to the training required pursuant to NRS 449.037, at least 3 hours of training in the management of medication. The caregiver must receive the training at least every 3 years and provide the residential facility with satisfactory evidence of the content of the training and his attendance at the training; and (b) At least every 3 years, pass an examination relating to the management of medication approved by the Bureau. This Regulation is not met as evidenced by: Based on record review on 3/25/09, the facility failed to ensure 1 of 5 caregivers had completed the required initial three hour medication management training (Employee #4). Severity: 2 Scope: 1	Y 072		

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Y 105	Continued From page 2	Y 105			
Y 105 SS=F	<p>449.200(1)(f) Personnel File - Background Check</p> <p>NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive.</p> <p>This Regulation is not met as evidenced by: Based on record review on 3/25/09, the facility failed to ensure 4 of 5 caregivers had proof of a negative criminal history background checks on file (Employee #1, #2, #3 and #4).</p> <p>Severity: 2 Scope: 3</p>	Y 105			
Y 320 SS=C	<p>449.220(1) Bedroom Doors - Locks</p> <p>NAC 449.220 1. A bedroom door in a residential facility which is equipped with a lock must open with a single motion from the inside unless the lock provides security for the facility and can be operated without a key or any special knowledge.</p> <p>This Regulation is not met as evidenced by: Based on observation and interview on 3/25/09, the facility failed to ensure all bedroom doors maintained single motion locks.</p> <p>Severity: 1 Scope: 3</p>	Y 320			
Y 878 SS=E	<p>449.2742(6)(a)(1) Medication / Change order</p>	Y 878			

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Y 878	Continued From page 3 NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order. This Regulation is not met as evidenced by: Based on record review and interview on 3/25/09>, the facility failed to ensure 3 of 7 residents received medications as prescribed (Resident #5, #6 and #7). Severity: 2 Scope: 2	Y 878			
Y 923 SS=F	449.2748(3)(b) Medication Container NAC 449.2748 3. Medication, including, without limitation, any over-the-counter medication or dietary supplement, must be: (b) Kept in its original container until it is administered.	Y 923			

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Y 923	Continued From page 4 This Regulation is not met as evidenced by: Based on observation on 3/25/09, the facility failed to keep medications belonging to 7 of 7 residents in their original container (Resident #1, #2, #3, #4, #5, #6 and #7). Severity: 2 Scope: 3	Y 923		
Y 936 SS=D	449.2749(1)(e) Resident file NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto. This Regulation is not met as evidenced by: Based on record review on 3/25/09, the facility failed to ensure 1 of 7 residents complied with NAC 441A.380 regarding tuberculosis (Resident #5) which affected all residents. Severity: 2 Scope: 1	Y 936		

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